## BEST AVAILABLE COPY

Application or Docket Number													ĺ	
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2001  09/99/301														
		(Celun				ENTITY OR		OTHER THAN SMALL ENTITY						
TOTAL CLAIMS			34				[	RATE FEE		FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 370.00		370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			34 minus 20=		- 14			X\$ 9==			ОЯ	X\$18=		
INDEPENDENT CLAIMS			⊌ minus3=		1			X42-			OR	X84=		
MU	TIPLE DEPEN	DENT CLAIM PI	RESENT				ı	+140=			OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2									TOTAL			TOTAL		
• If the difference in column 1 is less than zero, errer 10 in column 2 TOTAL OR TOTAL CHAIMS AS AMENDED • PART II OTHER TH.												THAN	1	
(Column 1) (Column 2) (Column 3)								SMA	LLI	ENTITY	OR	SMALL		1
MTA		CLAIMS REMARKING AFTER AMENDMENT		PREVI	HEST IBER IOUSLY IFOR	PRESENT EXTRA		RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ENDMENT A	Total	. 37	Minus	-	34	- 3		X\$ 9	•		OЯ	XX18=	150	
AME	Independent	· 4	Minus	240				X42	•		OR	733 X845		]
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140	) <b>a</b> .		OR	+280=		
								TO ADDIT.	TAL		OR	YOTAL ADDIT, FEE		1
2	1604	Acolumn 1)	•	(Colu	imn 2)	(Column 3)		-						]
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREV	HESY MBER NOUSLY D FOR	PRESENT EXTRA		RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NO.	Total	. 34	euniM	•3	ภ			X\$ 9	)= -		OR	X\$18=		
	Independent	• 5	Minus	***	<u>4</u>	1-1		X42	e		OR	<b>294</b> 0	200	Ma
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140	)=		OR	+280=		
·								TO ADDIT.	TAL		OR	YOTAL ADDIT. FEE		1
(Column 1) (Column 2) (Column 3)									-		_			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NU PREV	HEST MBER MOUSLY D FOR	PRESENT EXTRA		RAT	£	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	1
	Total .	•	Minus	**		•		X\$ 9	)=		OR	X\$18=		
	Independent		Minus		T C AN	•		X42	-		OR	X84=		]
۲	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140	) <del>-</del>		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3. FOTAL  ** If the Project Number Previously Paid For IN THIS SPACE is less than 20, enter "20."  ** ADDIT FEE  ** If the Trighest Number Previously Paid For IN THIS SPACE is less than 3, enter "2."											OR	TOTAL ADDIT, FEE	-1	1
		umber Previously F mber Previously Pr					r to							1
<u> </u>	A STOUTH COM						Б	not and	770.00	mark Othor. U	us. De	PARTMENT C	Y COMMERC	Æ